



**Training Partnerships for Prevention, Protection and Preparedness:
A Conference to Build Stronger Partnerships On Disaster Response Training**

[Conference Home](#) | [Agendas](#) | [Wednesday April 21](#) | [Thursday April 22](#) | [Friday April 23](#)

MEETING NOTES FROM BREAKOUT 5: TRANSPORTATION

Friday, April 23

Breakout 5: Transportation

Moderators – Brenda Cantrell, George Meany Center-National Labor College

The purpose of this group was to help identify key Transportation emergency response resources throughout the WETP community and to give information that will help establish a protocol for making these resources available quickly and efficiently to local, state, and key federal partners.

The group began with candid comments about transportation and emergency response plans. They discussed what resources, as grantees, they would have immediately accessible to help with transportation needs during an emergency. There was an overall consensus that stress management training would be a valuable addition to an emergency support activation plan.

The group went on to discuss the thought stimulators and breakout discussion guidelines.

Group answers follow.

Questions

I. Should there be a single contact point within a grantee organization that the WETP should contact to activate the response Plan?

Yes, but there should be at least one alternate in case the initial contact is absent.

II. What types of training have been provided within your organization that could be useful in response to a WMD incident in the hospital/public health sector?

There were a variety of combinations amongst the participants. Each type of training was represented by some of the participants. However, some topics were taught only on the awareness level (e.g. lead and asbestos). Additional training topics not listed included first responders, stress management, technicians, EMS, adult education, incident command, pesticides, DOT, and infectious diseases.

III. What training specific to hospitals and public health is appropriate for responses to the following WMD threats? (Use the numbers above, or add additional specific topics).

The group agreed that HAZWOPER, OSHA 10, confined spaces, SSP, and WMD preparedness were the topic training priorities across all four WMD threats. The group also made the distinction that depending on an individuals previous training, these courses can either be developed as awareness or refresher courses.

IV. Do you have instructional staff that would be available to assist in a response either in developing specific incident-targeted training or in on-site training activities?

All participants answered yes to this question.

If so, would their temporary reassignment have an impact on your ongoing instructional program?

Some participants said yes as it would impede normal training operations. However, they agreed that other projects that were less of a priority could be put on hold or that the temporary reassignment would not pose a significant problem to their organizations.

In what training programs listed in II above is instructional staff most limited? Most extensive?

There were a variety of answers for this question.

V. Professional staff, such as industrial hygienist, safety experts, and health physicists are employed by some of the grantees to support their programs. What professionals are on staff with your organization?

The groups' answers included certified industrial hygienists, health physicists, industrial engineers, and health and safety experts. All but one participant responded that these people would be able to respond to an incident. VI. If the individual grantee has training facilities in the proximity of the response scene, would those facilities be available to aid in the response should such be needed, particularly to support a long-term response action such as the WTC or the anthrax contaminations?

The group was split with half saying yes and half saying no. VII. Assuming financial support would be required in such an instance, how long would it take the grantee to develop a cost estimate for WETP? Are there barriers to the utilization of such facilities?

The group mentioned that a barrier could be fire stations that are too small to handle a large incident and that it would take about 1-2 days to develop a cost estimate.

VIII. What issues or constraints arise for a grantee when considering whether to participate in a response that WETP should be aware of in preparing the ESAP?

Some participants mentioned that they would not face any constraints while others listed availability of instructors, location, cost, arranging military assistance, using local unions, lag time, and safety of personnel if involved as issues to be addressed.

IX. What would the participants suggest with respect to an approach within WETP for assuring coordination among those grantees who might be engaged in a response action?

The group made the following comments:

- ❖ One coordinator should be assigned to represent unions, schools, and agencies;
- ❖ There should be a financial MOU for reimbursement for major expenses;
- ❖ There should be a pool of funds available for immediate costs;
- ❖ Current programs should have automatic extensions; and
- ❖ Participants should be allowed to provide input throughout the development process.

X. Are there additional training programs that are needed in order to more effectively support a response action in this sector?

The group made the following comments:

- ❖ We need to practice what we preach (e.g. cooperation between organizations);
- ❖ Plans should include courses for stress management;
- ❖ Classes should cover first aid, CPR, EMT, and hazmat security;
- ❖ Awareness training should be mandated; and
- ❖ There should be more worker training to promote recognition.